

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee AOL Advertising LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2014	
Mailing Address 770 Broadway-6th Floor		Amount 2275.00	
City New York	State NY	Zip Code 10003	Transaction ID : SE.47166
Purpose of Expenditure IE-Poliquin-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 09 / 2014
Name of Federal Candidate BRUCE L POLIQUIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		2783.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee AOL Advertising LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2014	
Mailing Address 770 Broadway-6th Floor		Amount 2275.00	
City New York	State NY	Zip Code 10003	Transaction ID : SE.47167
Purpose of Expenditure IE-Cain-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 09 / 2014
Name of Federal Candidate EMILY ANN CAIN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		5058.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4550.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Matt Kibbe

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Date

MM / DD / YYYY
 10 / 10 / 2014

Signature

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(Schedule E)

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 15161 Collection Center Dr.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8613.50</div>	
City Chicago	State IL	Zip Code 60693	Transaction ID : SE.47169
Purpose of Expenditure IE-Poliquin-Online Ads		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate BRUCE L POLIQUIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14011.58</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 15161 Collection Center Dr.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">8613.50</div>	
City Chicago	State IL	Zip Code 60693	Transaction ID : SE.47170
Purpose of Expenditure IE-Cain-Online Ads		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate EMILY ANN CAIN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22625.08</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">17227.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 29 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 5.83	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.47163
Purpose of Expenditure IE-Poliquin-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 29 / 2014
Name of Federal Candidate BRUCE L POLIQUIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 17.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 490.86	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.47164
Purpose of Expenditure IE-Poliquin-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 08 / 2014
Name of Federal Candidate BRUCE L POLIQUIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 508.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	496.69
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 77.64		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.47165 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2014		
Purpose of Expenditure IE-Poliquin-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate BRUCE L POLIQUIN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input checked="" type="checkbox"/> House District: 02 State: ME					
Calendar Year-To-Date Per Election for Office Sought 40825.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 10061.97		
City San Francisco	State CA	Zip Code 94139	Transaction ID : SE.47171 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2014		
Purpose of Expenditure IE-Poliquin-Online Ads		Category/ Type 004			
Name of Federal Candidate BRUCE L POLIQUIN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input checked="" type="checkbox"/> House District: 02 State: ME					
Calendar Year-To-Date Per Election for Office Sought 32687.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10139.61
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Google, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2014	
Mailing Address Department No. 33564 P.O. Box 39000		Amount 8061.03	
City San Francisco	State CA	Zip Code 94139	Transaction ID : SE.47172
Purpose of Expenditure IE-Cain-Online Ads	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 09 / 2014	
Name of Federal Candidate EMILY ANN CAIN		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 40748.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Sam Martin		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2014	
Mailing Address 4338 1/2 Normal Ave.		Amount 340.00	
City Los Angeles	State CA	Zip Code 90029	Transaction ID : SE.47168
Purpose of Expenditure IE-Poliquin-Video Production	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 09 / 2014	
Name of Federal Candidate BRUCE L POLIQUIN		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 5398.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8401.03
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	40814.33

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Matt Kibbe

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10 / 10 / 2014

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